CHALLENGING THE HEGEMONY OF EUROCENTRIC PSYCHOLOGY

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Introduction

The title of this historical conference, Psychology and Societal Tranformation, poses two important interrelated questions as we face the rigours of transformation in all facets of our society. Firstly, why the need to transform psychology? Secondly, how can we begin to make psychology relevant to the socio-political context in South Africa? This paper examines these two crucial questions. In exploring these two questions I will be developing two central propositions:

1) Psychology has traditionally been Eurocentric; i.e, it derives from a White middle-class value system (Katz, 1985; Smith, 1981). As a result mainstream psychology has largely been ethnocentric in its orientation, training and application and has neglected the mental health concerns of other racial groups and the socio-political injustices they endure on a daily basis.

2) Given this dereliction and disregard by the human service professions in addressing the mental health concerns and needs of other racial groups (Akbar, 1989; Sue, 1981), there is a compelling need to develop different paradigms and models to represent reality from the vantage point of the oppressed. This has echoed in the literature as a call to contextualise and indigenise psychology. During the past decade, a renewed interest and activism for a psychology with an Afrocentric paradigm has began to emerge more vigorously to contest the eurocentric substrate of psychology and benign pretensions of universality (Bulhan, 1985; Myers, 1988; White & Parham, 1990).

In addition to developing these two propositions I would also like to consider some general suggestions of how to begin to effectively challenge and transform Eurocentric psychology.

Definitions

Three important concepts that need defining are hegemony, ethnocentrism, and Eurocentrism. Webster's dictionary defines hegemony as leadership or political

domination. Ethnocentrism refers to the dominating power and control of the cultural patterns, behaviours and attendant values of one particular ethnic or racial group. When the proclivity is to perceive, construct, and understand phenomena such as reality, behaviour, and theory for instance from a predominantly Euro-American or white cultural perspective, this form of ethnocentrism is called eurocentrism. As South Africans, we have all suffered the effects of eurocentrism in its more overt expression as apartheid.

Why transform psychology?

Mainstream psychological theory and practice has been criticised for being culturally encapsulated and lacking in cross-cultural relevance (Sue, 1981; Wrenn, 1962). It has been charged that "counselling approaches have been developed by and for the White, middle class person" (Atkinson, 1979, p.13). Counselling and psychotherapy have traditionally been conceptualised in Western, individualistic terms. Moreover, psychologists who use theory and training based on this monocultural perspective, often operate from the assumption that such a theory base can be applied to all populations. This has been referred to as the myth of sameness or the assumption of universality. Making psychology more responsive to the needs of culturally different populations requires a willingness to engage in examining the underlying cultural values that constitute the basis of the discipline (Wrenn, 1962). Literature has alluded to this in the past but has not made the comparison explicit or transparent. Despite pretensions at being morally, politically and ethically neutral, psychology is fundamentally Eurocentric, both in theory and practice.

Making explicit the underlying dimensions of eurocentric psychology

Katz (1985) asserts that White culture serves as the foundation for counselling theory, research and practice. By definition, white culture is the synthesis of ideas, values, norms, beliefs, and behaviours coalesced from descendants of White European ethnic groups. In Table 1 Katz identifies the major components of white culture making explicit its specific values and beliefs. In Table 2 a framework for

viewing the cultural dimensions of traditional counselling is presented. In juxtaposing the two tables, the similarities between White culture and the cultural values that form the foundations of traditional counselling theory and practice are not coincidental. Because counselling theory and practice developed out of the experience of White therapists and researchers working almost exclusively with White client systems, it comes as no startling revelation that the profession inherently reflects white cultural values. However, when these same behaviour and practices we call therapy are applied to members of other cultural groups, they may in fact represent values that are antagonistic to that culture and as such may unwittingly become tools of cultural oppression (Trimble

& LaFromboise, 1987).

Insert table 1 & 2 about here

Bulhan (1985) influenced by the writings of Fanon (1959, 1963, 1967) exposes the deliberate and self-serving ethnocentric preoccupations of what he calls dominant psychology. He posits that dominant psychology is derived, founded, and imbued with the outlook that (a) the Euro-American world view is the only or best world view; (b) positivism or neo-positivism is the only or best approach to the conduct of scientific inquiry; and (c) the experience of white middle-class males are the only or most valid experiences in the world. He reminds the reader, however, that all psychological research and theorising entail some basic assumptions about the world and human nature. While these assumptions are implicit and often elusive, in their global assertions they are categorical and hardly permit exceptions. These basic assumptions or shared exemplars are neither empirically derived nor open to scientific inquiry, but they nevertheless pervade our perceptions of the world and how we theorise about it.

It so happens that the basic assumption of the dominant psychology is rarely examined or admitted. The reluctance to examine the basic assumptions of dominant psychology derives in part from fears of undermining the discipline's tenuous claims of its status as a science. That this dominant psychology is founded on and permeated with the implicit assumption that the only human reality is first Eurocentric, then middle class, and finally male in substance, represents a disregard that this culture-, class-, and sex-bound perspective is but one in a universe of diverse human realities (Baldwin, 1989; Bulhan, 1985; Katz, 1985; Sue, 1981). The perpetuation of this theory and practice predicated on one world view, one set of assumptions concerning human behaviour, and one set of values concerning mental health restricts our knowledge and understanding, limits our ability to be effective cross-culturally, and reduces the counselling process to a technicist-orientation (Kriegler, 1985). It also deprecates the value and usefulness of indigenous modes of intervening.

Research methodology: Tools of enslavement or liberation

The knowledge production component of dominant psychology has also been highlighted by several writers (Barnes, 1972; Bulhan, 1985; Guthrie, 1970; Williams, 1972) as being instrumental in rationalising and justifying the status quo and its attendant consequences such as racism and oppression. Bulhan (1985) charges that Eurocentric psychology's overidentification with the natural sciences fosters two reductionisms. The first is reductionism of human behaviour to individual psychology for the purpose of meaningful quantification. The second is the all-too-familiar practice of reducing human psychology to its lower animal denominator. People thus come to be considered as if they were rats and experimental rats as if they were human. And, since some humans are considered more animal-like than others, who but people of colour, especially "primitive tribes" muses Bulhan (1985), can provide simpler analogues of the complex psychology of Whites.

An analysis of studies about the behaviour of Blacks also reflects a bias toward a predominantly pathogenic focus (Guthrie, 1970). Historically, three models have

been used to guide and conceptualise research on non-white people in general and Blacks in particular (Sue, Arredondo, and McDavis, 1992). These models include:

1. The inferiority model.

2. The genetic deficiency model

3. The culturally deprived (deficient) model

The inferiority model contended that Black people were lower on the evolutionary hierarchy than were Whites, were more primitive and, thus were more inherently pathological. The second model argued that Blacks and other racial and ethnic groups were genetically deficient. The differences between Whites and Blacks were reflections of biological and genetic inferiority. Several prominent South African psychologists (e.g., M.L. Fick and H Verwoerd) were unabashed proponents of the genetic inferiority hypothesis. The cultural deprivation model developed as well-intentioned attempts to negate the genetic deficiency model. This model argued that environmental rather than hereditary factors were responsible for the presumed deficiencies in Black behaviour. From this deficit model came the cultural deprivation hypothesis which presumed that, due to the inadequate exposure to the right culture (i.e., eurocentric values, norms, customs and lifestyles), Blacks were indeed culturally deprived or disadvantaged and required cultural enrichment. Implicit in the concept of cultural deprivation is the notion that the dominant White middle-class culture establishes and sets the normative standard. Thus any behaviours, values, and lifestyles that differed from the Euro-American norm were seen as deficient and even deviant. These models have served to perpetuate a view that the culturally different are inherently pathological and have also undergirded racist research and counselling practices (Sue, Arredondo, & McDavis, 1992)

The advent of the multicultural model has been stimulated by the proposition that behaviours, life styles, languages, values, etc., can only be evaluated within the context of a specific cultural milieu (Pedersen, 1987; White, 1972). This model assumes and recognises that each culture has strengths and limitations, and, rather

than being viewed as deficient, differences between ethnic groups should be viewed as simply different. White and Parham (1990) opined that while the multicultural model is the latest trend in research with respect racial/ethnic groups in general and Blacks in particular, and is certainly a more positive approach to research with culturally distinct groups, it is by no means immune to the conceptual and methodological flaws of traditional psychology. While welcoming multiculturalism as becoming a "fourth force" in its influence on the field of mental health, Pedersen (1988) cautions against conceptualising multicultural counselling as a specialised aspect or sub-field of counselling. Establishing a specialised field of "multicultural counselling" he argues would be implying that the multicultural perspective is not relevant outside that specialized field when, in fact, to some extent all mental health counselling is multicultural. If we consider age, lifestyle, socioeconomic status, and gender differences in addition to ethnic and national differences, it quickly becomes apparent that there is a multicultural dimension in every aspect of mental health counselling (Pedersen, 1988).

Bodibe (1993) identifies several factors accounting for the paucity of research from indigenous psychologists. These include finding topics for theses and dissertations acceptable to both student and supervisor, allocation of research grants, and the touchiness with which politically sensitive topics are regarded. To these I would add the dearth of suitable research mentors, nascent research capacity at most historically Black universities, and the editorial bias for positivistic research.

Contesting the status quo

The indictment that psychology has suffered from amnesia and has failed to fulfil its professional mandate to the culturally different has become endemic (Bulhan, 1985; Sue, 1981). The status of psychology is being increasingly contested by practitioners of all races (Katz, 1985) who have appealed to the profession to re-examine and re-evaluate the theory and practice base of psychology and its sub-disciplines. Hence, more and more psychologists discontented with mainstream

psychology are calling for a theory and practice relevant to their particular socio-cultural milieu (Anonymous, 1985; Berger & Lazarus, 1987; Bodibe, 1993; Holdstock, 1981) and for recognition of ethnic pluralism (White & Parham, 1990) and differences in world views in multicultural societies.

A strong voice in this choir has come from African American psychologists who established their own professional association (Association of Black Psychologists) to give better articulation to their concerns. The call for a Black Psychology (White, 1972; White & Parham, 1990) and an Afrocentric perspective to psychology (Myers, 1988) has resounded from a growing discontent that traditional American psychology in all its varied forms has been insensitive to the needs of Black people. According to White and Parham (1990), the major forces that stimulated the growth of the contemporary Black psychology movement have been the failure of dominant psychology to provide a full and accurate understanding of Black reality and the dehumanisation of Black and other racial/ethnic groups resulting from the imposition and application of Eurocentric norms and values. As such, the emerging discipline of Black Psychology reflects an attempt to build a conceptual model that organises, explains, and leads to understanding the psychosocial behaviour of Blacks based on the primary dimensions of an Afrocentric world view. (White (1984) offers an excellent synthesis of the Afrocentric value system in **The Psychology of Blacks**. See also Bulhan's (1990) opening address at the Psychology and Apartheid conference).

In accusing Black psychologists of complicity, Baldwin (1989) accused " ..we (Black) psychologists, by and large, have functioned in the service of the continued oppression and/or enslavement of Black people rather than in the service of our liberation from Western oppression and positive Black mental health (unconsciously on our part, no doubt, but the consequences are still the same) " (p.67). Fanon (1957; 1963; 1967), too, challenged Western scientists and psychologists in particular to consider their role in the creation, perpetuation, and consequences of racism and colonialism on oppressed groups or what he coined " the wretched of

the earth".

<u>So what can be done to challenge eurocentric domination in psychology?</u>

As the struggle against the hegemony of apartheid has demonstrated, the struggle against eurocentric domination of psychology must be engaged in at many different interfaces or sites of struggle. A recent article by Kriegler (1992) makes several salient suggestions to empower the profession to become a significant role player in the "new" South Africa. These include: creating more mental health posts in the state sector; improving psychology's location and role in the school setting; training more effective psychologists cost-effectively; grappling with political and cross-cultural issues, and providing acceptable and accessible services. But, as long as psychology training programmes remain predominantly white, middle-class and male-oriented in terms of student and faculty numbers and training objectives, the press will be to maintain the present Eurocentric status quo in curriculum and training.

Proactive recruitment, affirmative action, and opening up more training opportunities to other racial groups are a necessary first step towards establishing a critical mass to foment change from within. Attendant to increasing the cultural diversity in both student and staff components is the imperative to infuse training curricula with multicultural, cross-cultural, gender, and racial identity development emphases. Cross-cultural competence should not be seen as ancillary or merely a specialisation in psychology but as an integral part of competent counselling and psychotherapy (Kriegler, 1992; Pedersen, 1988). Training objectives also need to address more directly the manifest psycho-social problems and needs in the community. Currently training programmes in psychology remain too clinically focused. There is an overemphasis on the diagnosis and treatment of mental illness, without a corresponding emphasis on the broader health promotion and normal developmental concerns. We should be training for professional psychology which should include many techniques in addition to psychotherapy to include applications to human problems far afield from mental illness (Fox, 1994). Ability to work with

groups and to conduct workshops need to become training imperatives.

Accessing, researching, and developing more relevant constructs, models, and theories that are more compatible with the reality of the oppressed are also essential. Rather than reinventing the wheel, progressive scholars may adapt much from seminal work already accumulated under the rubric of Afrocentric psychology, cross-cultural or multicultural counselling and indigenous psychology to shape the wheel of psychology to fit the South African context. In a similar vein, forging professional and personal links with committed individuals and associations in the diaspora may provide important sources of support and research collaboration.

Eurocentric conceptions of science and research also must be contested. What a researcher proposes to study and how s/he interprets such findings are intimately linked to a personal, professional, and societal value system (Sue, Bernier, Durran, Feinberg, Pedersen, Smith, & Vasquez-Nuttall, 1982). Cross-cultural training will help to guide more relevant and meaningful emic (within culture) and etic (cross-culture) research practice (Ponterotto & Casas, 1991). This advantage is underscored by Mio's (1989) assertion that knowledge of a culture is manifested in conceptualizations of problems and the means and goals for their resolutions. The lack of this knowledge and sensitivity may impose limitations on the nature and accuracy of research findings and interpretations, and in some cases tantamount to cultural oppression (Sue & Sue, 1990). Both emic and qualitative research methodologies lend themselves more fully to a dynamic understanding of culturally-specific behaviour and present important alternatives and extensions to entrenched research traditions.

A transformed or liberatory psychology needs to be weary of the dangers of professional elitism lest self-serving interests in professionalising psychology divert our attention and energies from grappling with the grave issues facing our nation in the times ahead. We need to seek ways of including (as opposed to claiming monopoly) and collaborating with other mental health professionals,

traditional healers, and service providers under the umbrella of an integrated community-based delivery system. Structured community psychology programmes emphasising preventive and promotive interventions in addition to curative may well be the vehicle to make psychology more accessible, accepting, and user-friendly to the majority of South Africans.

CONCLUSION

It is a Native American legend that when the earth begins to die as a result of all the harm inflicted upon it, warriors will arise from all over the world to heal the earth. These warriors will be known as warriors of the rainbow. As we face the challenges of transforming psychology and helping our nation to heal and grow healthy, mental health professionals have the imperative to recognise the biases of their training and their own ethnocentricism and have both a professional and moral obligation to learn how to engage in this rainbow dance in order to take up the challenges facing our society and profession.

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TABLE 1: The Components of White Culture: Values and Beliefs

_____

Rugged Individualism:

       Individual is primary unit

       Individual has primary responsibility

       Independence and autonomy highly valued and rewarded Individual can control environment

Competition:

       Winning is everything

       Win/lose dichotomy

Action Orientation:

       Must master and control nature

       Must always do something about a situation

       Pragmatic/utilitarian view of life

Decision Making:

       Majority rules when Whites have power

       Hierarchical

       Pyramid structure

Communication:

       Standard English

       Written tradition

       Direct eye contact

       Limited physical contact

       Control emotions

Time:

       Adherence to rigid time schedule

       Time is viewed as a commodity

Protestant Work Ethic:

       Working hard brings success

Progress and Future Orientation:

       Plan for the future

       Delay gratification

       Continual improvement and progress valued

TABLE 1: The Components of White Culture: Values and Beliefs

Emphasis on Scientific Method:

        Objective, rational, linear thinking

        Cause and effect relationship

        Quantitative emphasis

        Dualistic thinking

Power and Status:

        Measured by economic possessions

        Credentials, titles, positions

        Believe "own" system

        Believe better than other systems

Family Structure:

        Nuclear family is ideal social unit

        Male is breadwinner and head of the household

        Female is homemaker and subordinate to the husband

        Patriarchal structure

Aesthetics:

        Women's beauty based on blonde, blue-eyed, thin, young

        Men's attractiveness based on athletic ability, power, economic, and status (Katz, 1985, p.618)

TABLE 2: Cultural Components of Counselling: Values and Beliefs
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The Individual in Counselling:

      Individual is the primary focus

      Individual has primary responsibility

      Individual independence and autonomy highly valued

      Individual problems are intrapsychic and rooted in childhood and family

Action Orientation:

      Client can master and control own life and environment

      Client needs to take action to resolve own problems

      Bias against passivity or inaction

Status and Power:

      Belief that Western Counselling strategies are best

      Therapist is expert

      Credentials are essential

      Therapy is expensive

      Licensing used to maintain control of profession

Processes (communication):

      Verbal communication or talk therapy

      Standard monocultural English

      Self-disclosure by client

      Direct eye contact

      Reflective listening

Goals of counselling:

      Insight, self-awareness, and personal growth

      Improve social and personal efficiency

      Change individual behaviour

      Increase ability to cope

      Adapt to society's values

Protestant Work Ethic:

      Work hard in counselling and counselling works for you

Goal Orientation and Progress:

Belief in setting goals in counselling

Belief in reaching goals in life

Emphasis on Scientific Method:

Therapist objective and neutral

Rational and logical thought

Use of linear problem solving

Cause and effect relationships

Reliance on quantitative evaluation, including psychodiagnostic tests, intelligence tests, personality inventories, and career placement

Dualism between mind and body

Label problems using DSM III

Time:

Schedule appointments

Adherence to strict time schedule (50-minute hour)

Family Structure:

Nuclear family is ideal

Aesthetics:

YAVIS Client: young, attractive, verbal,

intelligent, successful.

(Katz, 1985, p.620)